

SUPERIOR COURT OF WASHINGTON FOR THE COUNTY OF

IN THE INTEREST OF:

NO.

DECLARATION OF ADOPTION FACILITATOR

Minor child

I, _____ hereby declare:

1. I am a social service worker for the ☐ Department of Social and Health Services.
☐ _____ Agency.

2. I have made the following efforts to verify whether the above-named child is Indian and to determine whether the Indian Child Welfare Act, 25 U.S.C. 1901 et seq., applies to this proceeding:

3. The child:

- ☐ is an Indian child as defined in 25 USC 1903(4). The Indian Child Welfare Act applies to this proceeding.
☐ may be an Indian child as defined in 25 USC 1903(4). The Indian Child Welfare Act may apply to this proceeding.
☐ is or may be a Canadian Indian child or an unenrolled Indian as defined in WAC 388-70-091(2) and (3). The Indian Child Welfare Act does not apply to this proceeding.
☐ Is not Indian. The Indian Child Welfare Act does not apply to this proceeding.

4. **Indian child.** (The following additional information applies only if the child is or may be Indian as defined in the Indian Child Welfare Act.)

4.1 The child:

- ☐ Is a member of the _____ Tribe. The Tribe's address is:

- ☐ Is eligible for membership in the _____ Tribe and is the biological child of a tribal member.
The Tribe's address is: _____

- ☐ Is of Indian ancestry and may be a member of or eligible for membership in a federally recognized Indian tribe.
I will make further efforts to ascertain whether the child is an Indian as defined by the Indian Child Welfare Act.

DISTRIBUTION: White - Court File Yellow - Service File Pink - Parents Goldenrod - Indian Tribe/Other Party

4.2 Tribal affiliation of child's mother: _____

Tribal affiliation of child's father: _____

Tribal affiliation of Indian custodian: _____

4.3 ☐ The child's residence/domicile is located within the reservation boundaries of the _____ Indian Tribe

☐ The child's residence/domicile is not located within the boundaries of an Indian reservation.

☐ There is not enough information available at this time to determine whether the child's residence/domicile is within an Indian reservation.

4.4 ☐ The child ☐ is ☐ is not the subject of any Tribal Court custody order. A copy of each such order is

☐ The child ☐ is ☐ is not a ward of Tribal Court.

☐ There is not enough information available at this time to determine if the child is a Tribal Court ward.

4.5 Information about the prospective adoptive parents (if known and if the prospective adoptive parents have consented to disclosure of the information):

Name(s): _____

Address: _____

Tribal affiliation: _____

I declare under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

Signed at _____, Washington, this _____ day of _____ 20 _____

SERVICE WORKER

ADDRESS STREET

CITY STATE ZIP CODE

TELEPHONE NUMBER